



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) GNN-014CP	
In re Application of Jeffrey BLUESTONE, <i>et al.</i>			
Application Number 09/835,297-Conf. #4765		Filed April 12, 2001	
For SURFACE-BOUND ANTIGEN BINDING PORTIONS OF ANTIBODIES THAT BIND TO CTLA-4 AND CD28 AND USES THEREFOR			
Art Unit 1644		Examiner Jessica H. Roark	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|--|----------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number _____

☒ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 43,270

July 1, 2004
Date

(617) 227-7400
Telephone Number

Signature
Megan E. Williams
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

<input type="checkbox"/> Total of 1 forms are submitted.
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 311 021 835 US, in an envelope addressed to: MS: Amendments, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.
Dated: July 1, 2004 Signature: _____ (Megan E. Williams)



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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 950.00

Complete if Known

Application Number	09/835,297-Conf. #4765
Filing Date	April 12, 2001
First Named Inventor	Jeffrey BLUESTONE
Examiner Name	Jessica H. Roark
Art Unit	1644
Attorney Docket No.	GNN-014CP

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit
Account
Number

12-0080

Deposit
Account
Name

Lahive & Cockfield, LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description Fee Paid

1001 770 2001 385 Utility filing fee

1002 340 2002 170 Design filing fee

1003 530 2003 265 Plant filing fee

1004 770 2004 385 Reissue filing fee

1005 160 2005 80 Provisional filing fee

SUBTOTAL (1) (\$) 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims --**= Extra Claims Fee from below Fee Paid

Independent Claims --**= Fee Paid

Multiple Dependent Fee Paid

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description

1202 18 2202 9 Claims in excess of 20

1201 86 2201 43 Independent claims in excess of 3

1203 290 2203 145 Multiple dependent claim, if not paid

1204 86 2204 43 ** Reissue independent claims over original patent

1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee

Code (\$) Code (\$) Fee Description Fee Paid

1051 130 2051 65 Surcharge - late filing fee or oath

1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.

1053 130 1053 130 Non-English specification

1812 2,520 1812 2,520 For filing a request for ex parte reexamination

1804 920* 1804 920* Requesting publication of SIR prior to Examiner action

1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action

1251 110 2251 55 Extension for reply within first month

1252 420 2252 210 Extension for reply within second month

1253 950 2253 475 Extension for reply within third month

1254 1,480 2254 740 Extension for reply within fourth month

1255 2,010 2255 1,005 Extension for reply within fifth month

1401 330 2401 165 Notice of Appeal

1402 330 2402 165 Filing a brief in support of an appeal

1403 290 2403 145 Request for oral hearing

1451 1,510 1451 1,510 Petition to institute a public use proceeding

1452 110 2452 55 Petition to revive - unavoidable

1453 1,330 2453 665 Petition to revive - unintentional

1501 1,330 2501 665 Utility issue fee (or reissue).

1502 480 2502 240 Design issue fee

1503 640 2503 320 Plant issue fee

1460 130 1460 130 Petitions to the Commissioner

1807 50 1807 50 Processing fee under 37 CFR 1.17(q)

1806 180 1806 180 Submission of Information Disclosure Stmt

8021 40 8021 40 Recording each patent assignment per property (times number of properties)

1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a))

1810 770 2810 385 For each additional invention to be examined (37CFR 1.129(b))

1801 770 2801 385 Request for Continued Examination (RCE)

1802 900 1802 900 Request for expedited examination of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 950.00

SUBMITTED BY

Name (Print/Type) Megan E. Williams

Registration No.
(Attorney/Agent)

43,270

(Complete if applicable)

Telephone (617) 227-7400

Signature

Megan E. Williams

Date

July 1, 2004

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Dated: July 1, 2004

Signature:

Megan E. Williams

(Megan E. Williams)